

**STATE OF NEW JERSEY – DIVISION OF PENSIONS AND BENEFITS
STATE POLICE RETIREMENT SYSTEM**

PO Box 295
Trenton, NJ 08625

ENROLLMENT APPLICATION

PART I: *(Please Print or Type)*

1. Name: _____ Membership Number: _____
LAST FIRST MIDDLE

2. Home Address: _____
STREET CITY STATE

3. Date of Birth: _____ 4. Marital Status: _____

5. DEPENDENTS: *(If married list Wife and Children/if single name Dependent Parents)*

NAME OF DEPENDENT	RELATIONSHIP	DATE OF BIRTH

6. DEATH BENEFITS *(Group Insurance)* – All members are automatically covered by the group life insurance program which requires no contribution by the member.

7. DESIGNATION OF BENEFICIARY – I designate the following person(s) to receive all death benefits described by the statute which are not specifically directed to a widow, child or dependent parent.

PRIMARY BENEFICIARY:

NAME OF DESIGNATION RELATIONSHIP BIRTHDATE

CONTINGENT BENEFICIARY:

NAME OF DESIGNATION RELATIONSHIP BIRTHDATE

If multiple beneficiaries are named, the following shall apply; "Share and share alike, survivor or survivors". Payment will be made on a lump sum basis unless the member indicates otherwise by filing appropriate form provided by this office.

SUPPLEMENTAL ANNUITY PROGRAM (Chapter 123, P.L. 63) ☐ I wish to enroll in this program. Please send me an enrollment application.
☐ I do not wish to enroll in this program.

DATE SIGNATURE OF APPLICANT

PART II CERTIFICATION BY EMPLOYER: Social Security No: _____ Payroll No: _____

8. Title of Employee: _____ Badge No: _____

9. Present Annual Salary: \$ _____ Present Annual Maintenance Allowance: \$ _____

10. Enlistment date in the New Jersey State Police: _____

I hereby certify that the information given above is correct in accordance with the records of the Division of State Police, Department of Law and Public Safety, State of New Jersey.

SIGNATURE OF CERTIFYING AGENT TITLE DATE

INSTRUCTIONS

This application is intended for those employees who were not members of the State Police Retirement and Benevolent Fund (R.S. 53:5-REPEALED) and who are making application after July 1, 1965 for membership in the State Police Retirement System of New Jersey.

DEATH BENEFIT (Group life insurance) – This program requires no contribution by the member and commences automatically with acceptance into the retirement system. The distribution of such benefits is subject to designation and instruction of the member, whereas certain “survivor” pensions are limited to and directed to eligible widows, children or dependent parents.

DESIGNATION OF BENEFICIARY – A member may nominate any person or persons or his estate as primary or contingent beneficiary. If multiple primary or contingent beneficiaries are named, it is to be understood that the beneficiaries still living at the death of the member will share equally in the distribution of the death benefits. Definite sums should not be indicated since the amount of death benefit changes with every change in the member’s salary. If other than lump sum distribution is desired or if other than equal shares is to apply, a special form provided for that purpose should be obtained from this office.

The Contingent beneficiary is the person(s) named by the member under the same conditions of primary except that it is payable only where the primary designation does not survive the member.

CHANGE OF BENEFICIARY – A member reserves the right to change his beneficiary designation for the death benefit and the accumulated deductions. This may be done at any time prior to retirement. The change must be filed with the retirement system and it will supersede any previous designation or instruction on file with this office. If no beneficiary designation is in effect at the member’s death, payment will be made to the member’s estate.

METHOD OF PAYMENT – The member may designate that the death benefits payable to his named beneficiary be made in one lump sum payment, in monthly installments over a fixed number of years, or as a monthly annuity payable for life of the beneficiary.

SUPPLEMENTAL ANNUITY – Members of the State Police Retirement System of New Jersey are entitled to participate in the Supplemental Annuity program conducted by the State of New Jersey. Voluntary contributions made to this plan will provide additional income at retirement. An explanatory booklet will be forwarded to those members indicating an interest in this plan.